



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 122600328

CITY OR TOWN **SPRINGFIELD**

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR **2013**

CLASS

YEAR

LICENSEE NAME: **Springfield Lodge of Elks #61**

DOING BUSINESS AS **Springfield Lodge of Elks**

ADDRESS **440 Rear tiffany St**

CITY/TOWN: **SPRINGFIELD**

STATE: **MA**

ZIP CODE: **01103**

MANAGER: **Avazzie, Raynond**

TYPE OF LICENSE: **Commercial club**

CATEGORY: **All Alcohol**

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

outdoor pavilion

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF MARCH (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 122600356

CITY OR TOWN **SPRINGFIELD**

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR **2013**

CLASS

YEAR

LICENSEE NAME: **KIMI LLC**

DOING BUSINESS AS **THE GRILL ON THE HILL**

ADDRESS **1059 S BRANCH PARKWAY**

CITY/TOWN: **SPRINGFIELD**

STATE: **MA**

ZIP CODE: **01103**

MANAGER: **WEAVER,
WILLIAM M**

TYPE OF LICENSE: **Restaurant**

CATEGORY: **Wine and
Malt Regular**

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

1620 SF SINGLE STORY BLDG FOR SERVICE AND STORAGE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

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EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 122600378

CITY OR TOWN **SPRINGFIELD**

APPLICATION FOR RENEWAL:

Seasonal

LICENSED FOR **2013**

CLASS

YEAR

LICENSEE NAME: **MGB, INC.**

DOING BUSINESS AS **ELEGANT AFFAIRS**

ADDRESS **619A DWIGHT ROAD**

CITY/TOWN: **SPRINGFIELD**

STATE: **MA**

ZIP CODE: **01103**

MANAGER: **BOXOLD,
MARGARET**

TYPE OF LICENSE: **Restaurant**

CATEGORY: **Wine and
Malt Regular**

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

**WOOD STRUCTURE (10'X12'), WITH DECK. SMALL DOOR FOR EMPLOYEES ACCESS, AND
CUSTOMER WINDOW WITH PORTABLE COUNTER AREA. EXTERIOR CHAIR AND TABLES, OUTSIDE
PATIO AND GOLF COURSE, WHOLES NUMBER 9,10,13,14,15,18**

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

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EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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